# MULTIPLE DEPENDENT CLAIM
## FEE CALCULATION SHEET
### (FOR USE WITH FORM PTO-875)

| SERIAL NO. | | FILING DATE |
|---|---|---|
| APPLICANT(S) | | |

## CLAIMS

| | AS FILED | | AFTER 1st AMENDMENT | | AFTER 2nd AMENDMENT | | | * | | * | | * | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | IND. | DEP. | IND. | DEP. | IND. | DEP. | | IND. | DEP. | IND. | DEP. | IND. | DEP. |
| 1 | 1 | | | 101 | | | 51 | | 1 | | 151 | | |
| 2 | | | | 102 | | | 52 | 1 | | | 152 | | |
| 3 | | | | 103 | | | 53 | | | | 153 | | |
| 4 | | | | 104 | | | 54 | | | | 154 | | |
| 5 | | | | 105 | | | 55 | | | | 155 | | |
| 6 | 1 | | | 106 | | | 56 | | | | 156 | | |
| 7 | | | | 107 | | 16 | 57 | | | | 157 | | |
| 8 | | | | 108 | | | 58 | | | | 158 | | |
| 9 | | | | 109 | | | 59 | | | | 159 | | |
| 10 | 1 | | | 110 | | | 60 | 1 | | | 160 | | |
| 11 | | | | 111 | | | 61 | | 1 | | 161 | 1 | |
| 12 | | | | 112 | | | 62 | 1 | | | 162 | | |
| 13 | | | | 113 | | | 63 | | | | 163 | | |
| 14 | 1 | | | 114 | | | 64 | | | | 164 | 1 | |
| 15 | | | | 115 | | | 65 | | | | 165 | | |
| 16 | | | | 116 | | | 66 | | | | 166 | | |
| 17 | | | | 117 | | | 67 | 1 | | | 167 | 1 | |
| 18 | | | | 118 | | | 68 | | | | 168 | | |
| 19 | | | | 119 | | | 69 | | | | 169 | | |
| 20 | | | | 120 | 1 | | 70 | | | | 170 | 1 | |
| 21 | | | | 121 | | 1 | 71 | 1 | | | 171 | | 1 |
| 22 | | | | 122 | 1 | | 72 | | | | 172 | 1 | |
| 23 | | | | 123 | | | 73 | | | | 173 | 1 | |
| 24 | | | | 124 | | | 74 | | | | 174 | | |
| 25 | | | | 125 | | | 75 | 1 | | | 175 | | |
| 26 | | | | 126 | | | 76 | | | | 176 | | |
| 27 | | | | 127 | | | 77 | | | | 177 | | |
| 28 | | | | 128 | | | 78 | | | 1c | 178 | | |
| 29 | | 15 | | 129 | | | 79 | | | | 179 | 1 | |
| 30 | 1 | | | 130 | 1 | | 80 | | | | 180 | | |
| 31 | | | | 131 | | | 81 | | | | 181 | 1 | |
| 32 | | | | 132 | | | 82 | | | | 182 | 1 | |
| 33 | | | | 133 | | | 83 | | | | 183 | | 1 |
| 34 | | | | 134 | | | 84 | | | | 184 | | 1 |
| 35 | | | | 135 | | | 85 | | | | 185 | | 1 |
| 36 | | | | 136 | | | 86 | | | | 186 | | |
| 37 | | | | 137 | | 1 | 87 | | | | 187 | 1 | |
| 38 | | | | 138 | 1 | | 88 | | | | 188 | 1 | |
| 39 | | | | 139 | | | 89 | | | | 189 | | |
| 40 | | | | 140 | | | 90 | | 15 | | 190 | | |
| 41 | | | | 141 | | | 91 | 1 | | | 191 | 1 | |
| 42 | | | | 142 | | | 92 | | | | 192 | 1 | |
| 43 | | | | 143 | | | 93 | | | | | | |
| 44 | | | | 144 | | | 94 | | | | | | |
| 45 | | | | 145 | | | 95 | | | | | | |
| 46 | | 6 | | 146 | | | 96 | | | | | | |
| 47 | | | | 147 | | | 97 | | | | | | |
| 48 | | | | 148 | | | 98 | | | | | | |
| 49 | | | | 149 | | | 99 | | | | | | |
| 50 | | | | 150 | | | 100 | | | | | | |
| TOTAL IND. | 33 | ← | | ← | | ← | TOTAL IND. | | ← | | ← | | ← |
| TOTAL DEP. | 11 | | | | | | TOTAL DEP. | | | | | | |
| TOTAL CLAIMS | 44 | | | | | | TOTAL CLAIMS | | | | | | |

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS